OHIO DEPARTMENT OF PUBLIC SAFETY	TRAFFIC C	RASH		*DENOTES M	ANDATORY F	ELD FOR	SUPP	LEMEN	T REPORT		LOCAL REPOR	TNUMBER	*		
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION									19-2846						
OH-1P OTHER REPORTING AGENCY NAME* PRIVATE PROPERTY HEATH POLICE DEPARTME							•		CIC*	HIT/SKIP 1 - SOLVED	NUMBER OF U		UNIT IN ERROR 98 - ANIMAL		
		 			PARTME	NT.		<u>U</u> 4	5,0,7,	2 - UNSOLVEI		,	1 99 - UNKNOWN		
COUNTY* LOCALITY* LOCATION: CITY, VILLAGE, TOWNSHIP* 45 1 2 VILLAGE Heath (Fourmile Lock)										CRASH DATE/ 12232019	2104		ASH SEVERITY - FATAL		
3-10WNSHIP TOWNSHIP TOWNSHIP								l p	OAD TYPE	LATITUDE o			- SERIOUS INJURY SUSPECTED		
	79 3-EAST HEBRON							"	RD	40 034	4461	3	- MINOR INJURY		
		4 - WEST	REFERENCE RO	AD NAME (DOAD	MII EDAST L	IOUSE #1		L.	OAD TYPE	10NCITUDE		4	SUSPECTED		
W W W W W W W W W W W W W W W W W W W		2 COUTU	Putnam	UMUN) SIIIMN UM	, MILEPUS I, P	10036 #)		"	RD	-82, 43	3 6 9 8		- INJURY POSSIBLE - PROPERTY DAMAGE		
REFERENCE POIN		4 - WEST	o to a servicino socialis	Mar Book I I I I I		No. area	- Constant	L	110	1946 77	7979		ONLY		
1 - INTERSECT	FROM REFERENCE	10	ROUTE TYP INTERSTATE RO	Marine Street Transfer Control	- ALLEY	ROAD HW- HI		RD -	ROAD	X WITHIN INTE	INTERSECTION OF				
2 - MILE POST	7 4 2-SO 3-EA	UTH US-	FEDERAL US RO	01.6	- AVENUE	LA - LA			SQUARE	4					
DISTANCE	4 - WE	ST SR-	STATE ROUTE	CR	- BOULEVARD - CIRCLE	MP - MI			STREET	WITHIN INTE	RCHANGE ARE	A NUM	BER OF APPROACHES		
FROM REFERENCE		JRE	NUMBERED COU NUMBERED TOW	NEUID CT	- COURT	PK - PA			TRAIL		ROAD	VAY			
	2-FE 3-YAI	ET	ROUTE	DK.	- DRIVE - HEIGHTS	PI - PI		WA-	WAY	ROADWAY DI	VIDED				
LOC#	ATION OF FIRST HAR	MFUL EVENT		MAN	INER OF CRAS	H COLLI	SION/II	MPACT	A STATE OF THE STA	DIRECTION OF TRAVE	ı.	MEDIA	N TYPE		
0 1 2 0 N SHO		CROSSOVER	ALLEY ACCESS		COLLISION			AR		1 - NORTH		DIVIDED F	LUSH MEDIAN		
3- IN MED			ADE CROSSING	₁ ८− , two	MOTOR	5 - BACK 6 - ANGL				2 - SOUTH 3 - EAST	L J 2.	(<4 FEET DIVIDED F	LUSH MEDIAN		
4 - ON ROA 5 - ON GOR		SHARED US TRAILS	E PATHS OR	TRA 2 - REA		7 - SIDES			RECTION E DIRECTION	4 - WEST	3.	(≥4 FEET DIVIDED () DEPRESSED MEDIAN		
6 - OUTSID	E TRAFFIC WAY 13	BIKE LANE		3 - HEA		9 - OTHE			LUINCOTON	4 - DI			RAISED MEDIAN		
7 - ON RAN 8 - OFF RA	""	-TOLL BOOTH -OTHER/UNI									1	(ANY TYPI OTHER/UN			
WORK ZONE R	FLATED		WORK ZONE TY	PE	LOCATIO	N OF CR	ASH IN	I WORK	ZONE	CONTOUR	CONDIT	ONS	SURFACE		
WORKERS PRE			ANE CLOSURE		1	BEFORI			RK ZONE	,1 ,	. 1	1	,2,		
	i	, 3-W	ANE SHIFT/CROS ORK ON SHOULE			- ADVAN	CE WAR	RNING A	REA	1 - STRAIGHT LEVEL 1 - DRY 1 - CONCRET			1 - CONCRETE		
LAW ENFURCE	MENT PRESENT		R MEDIAN NTERMITTENT 0						2 - STRAIGHT GRADE 2 - WET 2 - BLACKTOP,						
ACTIVE SCHOO	OL ZONE		THER 5 - TERMINATION AREA					3-CURVE LEVEL 3-SNOW ASPHALT			BITUMINOUS, ASPHALT				
LIG	HT CONDITION			WEATH	ER					4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUC	DIRT	3 · BRICK/BLOCK		
3 1-DAYLIGH			1 · CL		6 - SNOW						OIL, GRAVE	L	4 - SLAG, GRAVEL, STONE		
1 1	LIGHTED ROADWAY		2 - CLOUDY 7 - SEVERE CROS 3 - FOG, SMOG, SMOKE 8 - BLOWING SAN					IRT, SN	ow		6 - WATER (ST MOVING)	ANDING,	5 - DIRT		
	ROADWAY NOT LIGH UNKNOWN ROADWAY		4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - SLEET, HAIL 99 - OTHER / UNKNOWN							9 - OTHER/UNKNOWN					
9-OTHER/		2101171110	3.02	LLI, IIAIL	77 - OTHER	7 01410140					9 - OTHER/UNI	NOWN			
NARRATIVE						77.3	1	1				1	Indicate the north		
Unit #2 was stop							+	_					direction with an "N" on the		
Rd. facing south failed to stop an	nbound. Unit #1 vid struck the real	was traveli r of Unit #2	ng south behi	ind Unit #2. L	Jnit #1		Not	To Sca	10 1			V	compass diagram.		
						- 4-	IVUI	70 308	·						
				Michael Commission of the Comm			(= N = D			Putnam Rd		•		
						-									
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	···		17-11-11-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1							₽					
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		-44144-415-414-414-414-41-41-41-41-41-41-41-41-41-							Î						
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. .				***************************************			_								
CRASH REPORT	ED DATE / TIME	10	SPATCH DATE /	TIME I	ARI	RIVAL DA	TE/TI	ME.		SCENE CLEARED		on Rd .	PORT TAKEN BY		
1223201				2105	1223				2 1	2232019		100	POLICE AGENCY		
TOTAL TIME	OTHER	TOTAL	OFFICER'S		7770					ER'S NAME*	<u> </u>		MOTORIST		
ROADWAY CLOSED		MINUTE		CE, JEREN	ΜY		_	UNLUNE	Str	J Sugar	_		SUPPLEMENT (CORRECTION OF ADDITION		
		15	5	OFFICER'S BAD	GE NUMBER	*	7		CHECKED BY	OFFICER'S BADGE N		7 -	TO AN EXISTING PEPORT SENT TO COPS		
								1	1 1 1 3 0 1						

	UBLIC SAFETY UNIT		LOCAL REPORT NUMBER							
UNIT #	OWNER NAME: LAST, FI	RST, MIODLE (SAME AS DRIVE	R	OWNER PHONE: 880	LUDE AREA CODE (SAME AS DRIVER					
	 IDDRESS: STREET, CITY, STAT	E, ZIP (SAME AS DRIVER)				9 1 - NONE 2 - MINOR DA	DAMAGE SCALE 3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE			
COMMER	CIAL CARRIER: NAME, ADD	DRESS, CITY, STATE, ZIP		COMMERCIAL CARRIES	R PHONE: INCLUDE AREA CODE		9 - UNKNOWN MAGED AREA(S)			
LP STATE	LICENSE PLATE#	VEHIC	LE IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		ATE ALL THAT APPLY			
INSUR		PANY	INSURANCE POLICY # US DOT #	COLOR TOWED BY: COMPAN	VEHICLE MODEL	10 11 1 1 1 1 1 1 2	10 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
COMMI	LOCK X HIT/SKIP UN	#UCCUPANTS	EHICLE WEIGHT GVWR/GCWR 1 - <10K lbs. 2 - 10,001 - 26K lb.	HAZARDO MATERIAL RELEASED	DUS MATERIAL CLASS # PLACARD ID #	9 9 3 8 4 7 5 5	3 9 9 3 4 7 5 5 4			
O1	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE	J 3 - >26K LBS. 12-GOLF CART 13-SNOWMOBILE 14-SINGLE UNITTRUCK 15-SEMI-TRACTOR 16-FARM EQUIPMENT	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN	10	12 7 6 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
0	6 - VAN (9-15 SEATS) # of trailing units	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	12	7 5 5 4			
9	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRE 1-YES 2-NO 9-OTHER/UNK	0?		3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	10 12 1 9 9 9 3	10 11 12 1 2 2 3 3 9 9 3			
99, SPECIAL FUNCTION	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER			16 - FARM 17 - MOWING 18 - SNOW REMOVAL 19 - TOWING 20 - SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER/ UNKNOWN	8 7 6 5	8 7 5 5			
O.1 CARGO BODY TYPE				8 - POLE 9 - CARGO TANK 10 - FLAT BED 11 - DUMP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER/UNKNOWN	9 3 9	12 12 12			
	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR ACCIDENT	99 - OTHER/ UNKNOWN	6				
NON-MOTORIS' LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE (- TOP (13)	O] -UNDERCARRIAGE [14] -ALL AREAS [15] NOT AT SCENE [16]			
3 ACTION		1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC 12 - ORIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLEOVEHICLE 99 - OTHER / UNKNOWN	1 O O-NO DAMAG	TO UNIT 15 - VEHICLE NOT AT SCENE M 99 - UNKNOWN			
O8	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPER TURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACC 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	13 - IMPROPER START FROM A	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAO SHIFTING/FALLING/ SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY # OF THROUGH LANES	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS	12-IMPROPER BACKING				on ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
,2,0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11-CROSS CENTERLINE - OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING			
3	3 - IMMERSION 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY 19 - A 3 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 20 - N 4 - DEDESTRIAN 14 - PEDESTRIAN 17 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 14 - PEDESTRIAN 17 6 - CARGO / EQUIPMENT 17 7 - CARGO / EQUIPMENT 18 - A 7 - CARGO / EQUIPMENT 19 - CARGO / E		18 - ANIMAL — DEER 19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE - STRUCK	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	UNIT / NON-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAS 2 - SOUTH 6 - NORTHWES FROM				
5 6	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNIKNOWN	UNIT SPEED OOO	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED			
1	FIRST HARMFUL EVEN	T 1 MOST H	ARMFUL EVENT							

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST									19	19-2846					
0,1	NAME: LAST,	FIRST, MIDDLE								DATE OF BIRT	'H		AGE	GENDER F	
ADDRESS	S: STREET, CITY, S	REET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
INJURIES 5	JURIES INJURED EMS AGENCY (NAME)					INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED 9.9				DOT-COMPLIANT SEATING POSITION AIR B.			EJECTION	TRAPPED	
OL STATE	OPERATOR	LICENSE NUMBER	OFFEN	OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION			CITATION NUMBER				
≥ OL CLASS	SELECT UP TO 2	RESTRICTION SELEC		IVER STRACTED		_	ECTED RIJUANA	condition	STATUS 1	TYPE VALUE	STATUS		TEST(S RESULT	SELECT UP TO 4	
UNIT # 0.2		FIRST, MIDDLE ERLUND, CLIFFOR	ייין יי		OTHER DRUG			.06	DATE OF BIRT	Н Э		AGE 7 7	GENDER M		
ADDRESS 9445	S: STREET, CITY, S	·		07					L	T PHONE - INCLUDE AF	REA CODE			L1-1	
ADDRESS 1NJURIES 5		EMS AGENCY (NAME)	12 011		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAI			SAFETY EQUIPMENT USED 04	DOT-C	DOT-COMPLIANT SEATING POSITION AIR BAG UMC HELMET 01			USAGE EJECTION TRAPPED		
OL STATE		ICENSE NUMBER 0442169		OFFENS	OFFENSE CHARGED LOCAL			OFFENSE DESC			CITA	CITATION NUMBER			
0	OL CLASS ENDORSEMENT RESTRICTION SELECT UP TO 3 DRI DIS					OHOL / DRUG SUSPE	CTED RIJUANA	condition		COHOL TEST TYPE VALUE	STATUS	DRUG TYPE	TEST(S) RESULT	SELECT UP TO 4	
UNIT#	NAME: LAST,		OTHER DRUG				DATE OF BIRTH AGE					GENDER			
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
0): MEDICAL FACILITY (DOT-COMPLIANT SEATING POSITION AIR BAG US/			G USAGE	EJECTION	TRAPPED			
OL STATE	<u> </u>				OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	ENSE DESCRIPTION			CITATION NUMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		OHOL / DRUG SUSPE	CTED IJUANA	CONDITION	STATUS	COHOL TEST TYPE VALUE	STATUS	DRUG	TEST(S) RESULT	SELECT UP TO 4	
L	URIES	SEATING POSITION	L	AIR BAG	01	THER DRUG OL CLASS		OI PESTPIC		DRIVER DISTR	ACTION	(CT CTA		
1 - FATAL 2 - SUSPECTED 3 - SUSPECTED 4 - POSSIBLE II 5 - NO APPAREI 1 - NOT TRANSI /TREATED A 2 - EMS 3 - POLICE 9 - OTHER / UNI SAFETY E 1 - NONE USED 2 - SHOULDER I 3 - LAP BELT 0I 4 - SHOULDER I 5 - CHILD REST FORWARD F	D SERIOUS INJURY D MINOR INJURY NJURY NT INJURY TAKEN BY PORTED IT SCENE KNOWN GUIPMENT GUIPMENT GUIPMENT GUIPMENT GUIPMENT GEAT ISED E PADS USED EES, ETC.) E CLOTHING PEDESTRIAN NLY	1-FRONT - LEFT SIDE (MOTORCYCLE DRIVER) 2-FRONT - MIDDLE 3-FRONT - RIGHT SIDE 4-SECOND - LEFT SIDE (MOTORCYCLE PASSENGER) 5-SECOND - MIDDLE 6-SECOND - RIGHT SIDE 7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE 9-THIRD - RIGHT SIDE 10-SLEEPER SECTION OF TRUCK CAB 11-PASSENGER IN OTHER - ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP) 12-PASSENGER IN UNENCLOSED CARGO AREA 13-TRAILING UNIT 14-RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT) 15-NON-MOTORIST 99-OTHER / UNKNOWN	1 - NOT DEF 2 - DEPLOY 3 - DEPLOY 4 - DEPLOY 5 - NOT APP 9 - DEPLOY 1 - NOT EJE 2 - PARTIAL 3 - TOTALLY 4 - NOT APP 1 - NOT TRA 2 - EXTRICA MECHAN 3 - FREED B	PLOYED ED FRONT ED SIDE ED BOTH FRON PLICABLE MENT UNKNOT JECTION CTED LLY EJECTED LLICABLE RAPPED PPED JECUL BY JECUL	WN	1 - CLASS A 2 - CLASS B 3 - CLASS B 3 - CLASS C 4 - REGULAR CLASS (OHIO = D) 5 - M/C MOPED ONLY 6 - NO VALID OL OL ENDORSEM H - HAZMAT M - MOTORCYCLE P - PASSENGER N - TANKER Q - MOTOR SCOOTER R - THREE-WHEEL MOT S - SCHOOL BUS T - DOUBLE & TRIPLE T X - TANKER / HAZMAT GENDER F - FEMALE M - MALE U - OTHER / UNKNOWN	ORCYCLE	OL RESTRIC 1 - ALCOHOL INTERL 2 - CDL INTRASTATE 3 - CORRECTIVE LEN 4 - FARM WAIVER 5 - EXCEPT CLASS A 6 - EXCEPT CLASS A 8 - CLASS B BUS 7 - EXCEPT TRACTOR 8 - INTERMEDIATE L RESTRICTIONS 9 - LEARNER'S PERM 10 - LIMITED TO DAYL 11 - LIMITED TO EMPI 12 - LIMITED TO EMPI 13 - MECHANICAL DE' (SPECIAL BRAKE CONTROLS, OR OT ADAPTIVE DEVIC 14 - MILITARY VEHICI 15 - MOTOR VEHICLES AIR BRAKES 16 - OUTSIDE MIRROR 17 - PROSTHETIC AID 18 - OTHER	OCK DEVICE ONLY USES BUS BUS R-TRAILER ICENSE HIT LIGHT ONLY LOYMENT R VICES S, HAND HER ES LES ONLY WITHOUT	DRIVER DISTR 1 - NOT DISTRACTED 2 - MANUALLY OPERA ELECTRONIC COMI DEVICE (TEXTING, DIALING) 3 - TALKING ON HAND COMMUNICATION I 4 - TALKING ON HAND COMMUNICATION I 5 - OTHER ACTIVITY W ELECTRONIC DEVI 6 - PASSENGER 7 - OTHER DISTRACTI INSIDE THE VEHICLE 9 - OTHER / UNKNOWN CONDITIO 1 - APPARENTLY NORM 2 - PHYSICAL IMPAIRM 3 - EMOTIONAL (E.G., DI ANGRY, DISTURBED) 4 - ILLNESS 5 - FELL ASLEEP, FAIN FATIGUED, ETC. 6 - UNDER THE INFLUE OF MEDICATIONS / I / ALCOHOL 9 - OTHER / UNKNOWN	ATING AN MUNICATION , TYPING, IS-FREE DEVICE	1 - NONE C 2 - TEST R 3 - TEST G SAMPI 4 - TEST G 5 - TEST G UNKNO ALCOH 1 - NONE 2 - BLOOD 3 - URINE 4 - BREAT 5 - OTHER	REFUSED GIVEN, CONTLE/UNUSAE GIVEN, RESU GIVEN, RESU HOLTES H GTEST ESTRES TURATES DIAZEPINES BINOIDS IE SS/OPIOIDS	AMINATED BLE PLTS KNOWN PLTS T TYPE SULT(S)	

UCCUPANT / WITNESS ADDENDUM								19-2846					
	.02		ST, FIRST, MIDDLE	MEN				01271943 AGE GENDI					
								CONTACT PHONE - INCLUDE AREA CODE					
ADDRESS: STREET, CITY, STATE, ZIP 9445 ROANOAK DR ROCKFORD IL 61107									1 1	1 1		1	
ŏ	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)	SAFETY EQUIPMENT	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION 1	TRAPPED 1				
	UNIT#	NAME: LA	ST, FIRST, MIDDLE				DAT	E OF BIRTH		AGE	GENDER		
										1 18	î 1 1	ı	
OCCUPANT	ADDRESS	STREET, CITY	, STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE							
3	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO MEDICAL FACIL	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
5		السسا						MC HELMET		لبسبا	لـــــا		
	UNIT#	NAME: LAS	ST, FIRST, MIDDLE					DATE OF BIRTH AGE				GENDER	
CCUPANT	ADDRESS	: STREET, CITY	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		TAKEN BY					USED	DOT-COMPLIANT MC HELMET	1				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
Ļ-													
OCCUPAN	ADDRESS	: STREET, CITY	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
0 1	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		لــــا	JRIES	SAFETY	Y EQUIPMENT USED		SEATING POS	MC HELMET		AIR BAG US		لـــــا	
1100-000 Species		AL PECTED SE	RIOUS INJURY NOR INJURY	1 - NONE US VEHICLE		1 - FRON (MOT	IT – LEFT SIDE ORCYCLE DRIV IT – MIDDLE		1 - NOT DE 2 - DEPLO	PLOYED YED FRONT	AGE		
		SIBLE INJU		3 - LAP BELT	T ONLY USED 3 - FRONT - RIGHT 4 - SECOND - LEFT				3 - DEPLOYED SIDE 4 - DEPLOYED BOTH				
0.0000		PPARENT			ER & LAP BELT USED	(MOT	ORCYCLE PASS		FRONT/SIDE				
		INJURED	TAKEN BY		ESTRAINT SYSTEM – 5 - SECOND – MIDDLE D FACING 6 - SECOND – RIGHT SID			5 - NOT APPLICA					
		TRANSPOR			ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9- DEPLOYMENT ON					
USA		EATED AT S	CENE	REAR FA		CAR)	DOS PARELTSON A.T	EJECTION					
8	2 - EMS 3 - POLI			7 - BOOSTER 8 - HELMET	USED 9 - THIRD - RIGHT SIDE				1 - NOT EJ	RTIALLY EJECTED			
N.		ER / UNKNO	wn		IVE PADS USED	F TRUCK CAB ER ENCLOSED	Y EJECTED						
8		GEN	IDER		KNEES, ETC.)	AILING UNIT,	4 - NOT AP						
900	F-FEMA	LE			IVE CLOTHING 3 – PEDESTRIAN	A P. INDOMESTICATION	ICK-UP WITH CAP ENGER IN UNEI		TRAPPE	PPED			
- 6	M - MALI	E R/UNKNO	AZAL	/ BICYCLI	CARCO AREA			1 - NOTTRAPPED			D		
	0 - OTHE	K7 ONKNO		99- OTHER/	JNKNOWN		IG ON VEHICLE	EXTERIOR	2 - EXTRIC MEANS	ATED BY ME	CHANIC	AL	
W. Allegan						15 - NON-N	TRAILING UNIT) MOTORIST R/UNKNOWN		A STREET	BY NON-ME	CHANICA	L	
2	NAME: LAS	ST, FIRST, MIDD	LE			d hardender	(a) - c ever () as e- a	DAT	E OF BIRTH		AGE	GENDER	
	ADDRESS:	STREET, CITY,	STATE ZIP					CONTACT PHONE	- INCLUDE AREA COR		1		
*		J. N.E. 1, VII 1,	was the first					L. L.	- INCLUDE AREA COD				
NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GEND						
Д 2 - 3	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COD	E	¥		
NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
NESS			**					<u> </u>			<u></u>		
- M	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	- INCLUDE AREA COD	E I I			
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